

## Adverse Events **Appendix A: Adverse Event Definitions**

Was there a major infection?\*

YES NO UNK

Date of onset:\*

ST=

Infection contribute to Death:\*

YES NO UNK

Location of patient:\*

In hospital Out of hospital Unknown

Location of infection:  
(check all that apply)\*

Pump / related - Drive Line  
 Pump / related - Exit Cannula  
 Pump / related - Pump Pocket  
 Pump / related - Pump Interior  
 Positive Blood cultures  
 Line Sepsis  
 Pulmonary  
 Urinary Tract  
 Mediastinum  
 Peripheral Wound  
 GI  
 Unknown  
 Other, specify

Specify:\*

Type of infection:\*

Was drug therapy an  
intervention for this AE?:\*

YES NO UNK

If yes, what was the route?  
:\*

Was surgery an intervention for  
this AE?:\*

YES NO UNK